



State of Nebraska
Nebraska Commission for the Deaf and Hard of Hearing
4600 Valley Road, Suite 420
Lincoln, NE 68510-4844



Form D: Renewal Application – Specialty License

Section A — Personal Information:

1. Legal Name: _____ Birth date: ____/____/____

2. Social Security Number: ____ - ____ - ____ RID Membership Number: _____

3. Mailing Address: _____
(Street/Apt. #/P.O. Box/Route)

(City)

(State)

(Zip Code)

4. Home Telephone: _____ Business or Cell Phone: _____

5. E-mail Address: _____

6. **Submit a copy of one of the following picture IDs:**

☐ Driver's License ☐ Passport ☐ Other: _____

7. **Moral Character:**

Have you been convicted of a misdemeanor or felony in the past 2 years? ☐ Yes ☐ No

If yes, official court records relating to the conviction and disposition must be submitted along with a letter from you explaining your conviction.

Have you been disciplined, or are currently the subject of any disciplinary action, in any jurisdiction, related to providing interpreting services or adhering to either the RID Code of Ethics or the NAD-RID Code of Professional Conduct in the past 2 years? ☐ Yes ☐ No

If yes, submit the type of action, date, and name and address of the entity taking such action along with an explanation letter from you.

Section B – Eligibility Criteria for Licensing:

If RID certified, a copy of your current card or proof of certification will need to be submitted with this application.

Applicants who are RID or QAST certified must have one of the following:

- | | |
|---|---|
| <input type="checkbox"/> RID Certified Deaf Interpreter | <input type="checkbox"/> RID Certified Deaf Interpreter-Provisional |
| <input type="checkbox"/> RID Reverse Skills Certificate | <input type="checkbox"/> RID Oral Transliteration Certificate |
| <input type="checkbox"/> RID Oral Interpreting Certificate: Comprehensive | <input type="checkbox"/> RID Oral Interpreting Certificate: Spoken to Visible |
| <input type="checkbox"/> RID Oral Interpreting Certificate: Visible to Spoken | <input type="checkbox"/> QAST Intermediary Interpreter (Deaf Interpreter) |

Section C – Specialty Category:

- ☐ Intermediary Interpreter ☐ Oral Interpreter/Transliterater ☐ Tactile Interpreter
☐ Cued Speech Transliterater ☐ Legal Interpreter ☐ Other: _____

For a Specialty License in Legal Interpreting —

A copy of your current card or proof of certification will need to be submitted with this application.

Applicants must have one of the following:

- ☐ RID Specialist Certificate: Legal ☐ RID Conditional Legal Interpreting Permit-Relay

I have enclosed other documentation as approved by the Commission: _____

I am eighteen (18) years of age or older: ☐Yes ☐No

I have attained a High School diploma/or equivalent: ☐Yes ☐No

Name of Institution Granting the Diploma/Certification: _____

Date of Graduation/Program Completion: ____/____/____

Section D - Licensure Fees:

Specialty License Renewal Fee:

- ☐ \$50.00 for two years

Section E - Certification of Applicant:

I hereby agree that I have knowledge of and comply with the standards set forth in the Regulations Governing the Practice of Interpreting or Transliterating as established by the State of Nebraska and understand the types of misconduct for which disciplinary proceedings may be initiated against me pursuant to said regulations.

I also certify that the preceding information is correct to the best of my knowledge. I agree to follow the NAD-RID Code of Professional Conduct as set forth in section 002 of the Regulations Governing the Practice of Interpreting or Transliterating.

Signature of Applicant

Date

Make check or money order payable to: Nebraska Commission for the Deaf and Hard of Hearing
Send application, all required documents and licensure fee to:

Nebraska Commission for the Deaf and Hard of Hearing
Attention: Licensing
4600 Valley Road Ste 420
Lincoln NE 68510